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**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, PO Box 1450, Alexandria, VA, 22313-1450 on January 10, 2005

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara

(Signature of Person Mailing Paper or Fee)

**PATENT APPLICATION**  
Attorney Docket No. SUN-4431-ARG

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**IN RE PATENT APPLICATION OF**

Skef F. Iterum et al. )  
Serial No. 09/662,553 )  
Filing Date: September 15, 2000 )  
Title: METHOD AND APPARATUS FOR REACH- )  
ING AGREEMENT BETWEEN NODES IN )  
DISTRIBUTED SYSTEM )

)

) Examiner: Salad, Abdullahi Elmi

)

) Group Art Unit: 2157

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**AMENDMENT TRANSMITTAL LETTER**

Mail Stop: AF  
Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- Response under 37 C.F.R. § 1.111 to official action mailed December 27, 2004.
- A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- Terminal disclaimer under 37 C.F.R. § 1.321(c), including
  - check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
  - 2 certificates under 37 C.F.R. § 3.73(b).
- Information disclosure statement, form 1449 and \_\_\_ references.
- No additional claims fees are required.

[ ] An additional fee is required, and is calculated as shown below:

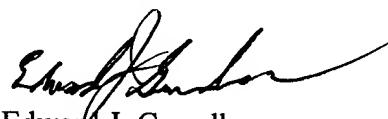
<b>AMENDED CLAIMS</b>					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0.00</b>

[ ] A check in the amount of \$\_\_\_\_ is enclosed.  
[ ] Charge \$\_\_\_\_ to Deposit Account No. \_\_\_\_ (Docket No. \_\_\_\_).  
[x] Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P4431).

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Respectfully submitted,

By



Edward J. Grundler  
Registration No. 47,615

Date: January 10, 2005



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Jeannie Camara

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Application Number : 09/662,553 Confirmation Number: 2928

Applicant : Skef F. Iterum et al.

Filed : September 15, 2000

TC/A.U. : 2157

Examiner : Salad, Abdullahi Elmi

Docket Number : SUN-P4431-ARG

Customer No. : 22,835

M/S: Box AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

#### **AMENDMENT**

Sir

In response to the office action of **December 27, 2004**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 14 of this paper.